

FRANKLIN COUNTY

Development Department

280 East Broad Street, Suite 202

Columbus, Ohio 43215

BOARD OF ZONING APPEALS

VARIANCE APPLICATION

Revised September 1, 2003

To Be Completed By the Development Department Staff	
File Number:	Receipt #: _____
Project Location:	Amount: _____
Parcel Number:	Date: _____
Township:	By: _____
Zoning:	

To Be Completed By Applicant (Please Print or Type)		
APPLICANT DATA		
Name:		
Company Name		
Address:		
Telephone No.:	Fax No.:	
PROPERTY DATA		
Owner's Name:		
Property Address:		
Telephone No.:	Fax No.:	
Township:	Subdivision Name:	
Zoning:	Floodplain: Yes or No	
Dimensions of Subject Property		
Frontage:	Depth:	Acreage:
Existing Utilities:		
Water: <input type="checkbox"/> Public (Central) <input type="checkbox"/> Private (Onsite)	Wastewater: <input type="checkbox"/> Public (Central) <input type="checkbox"/> Private (Onsite)	

Area Variance(s) Requested

Below, list the specific section from the Zoning Resolution from which the variance is being sought and a description of each variance being sought.

1. Section: _____ Description: _____

2. Section: _____ Description: _____

3. Section: _____ Description: _____

4. Section: _____ Description: _____

Please Describe the Proposed Project:

PLEASE NOTE that the following questions must be answered completely. Your statements will be used to evaluate your variance request. If these questions are not answered, the application will be considered incomplete. The following will be used as a guide to evaluate your application.

The Franklin County Zoning Resolution sets forth the following requirements, all of which must be met if a variance is to be granted. State in detail the manner in which you believe each of these requirements is met in this case:

1. Are there exceptional or extraordinary circumstances applying to the property involved or the intended use of the property that do not apply generally to other property or uses in the same zoning district.

2. That a literal interpretation of the provisions of this Zoning Resolution would deprive the applicant of rights commonly enjoyed by the other properties in the same Zoning District under the terms of the Zoning Resolution.

3. That the special conditions and circumstances do not result from the action of the applicant.

4. That granting the variance request will not confer on the applicant any special privilege that is denied by this Zoning Resolution to other lands or structures in the same Zoning District.

5. Would granting the variance adversely affect the health or safety of persons residing or working in the vicinity of the proposed development, be materially detrimental to the public welfare, or injurious to private property or public improvements to the vicinity?

6. How can the property in question yield a reasonable return or whether there can be any beneficial use of the property without the variance?

7. How substantial is the variance? (*i.e. 10 feet vs. 100 feet - Required frontage vs. proposed*)

8. How would the essential character of the neighborhood be substantially altered or would the adjoining properties suffer substantial detriment as a result of the variance?

9. How would the variance adversely affect the delivery of governmental services?
(*e.g., water, sewer, garbage, fire, police - Verification from local authorities – i.e. fire might be required*)

10. Did the applicant purchase the property with knowledge of the zoning restrictions?

11. How could the applicant's predicament feasibly be obtained through some method other than a variance?

12. How would the spirit and intent behind the zoning requirement be observed and would substantial justice be done by granting the variance?

I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the County. I hereby certify that I have read and fully understand all the information required in this application form.

Signature of applicant

Date

Signature(s) of Owner(s)
(Must be Notarized)

Signature(s) of Owner(s)
(Must be Notarized)

Date

***Agent must provide documentation that they are legally representing the property owner.**

***Approval does not validate the responsibility of the property owner to meet all restrictions and covenants that are on that property.**

Required Submissions:

- 1) The completed and signed application form.
- 2) Fee – due at time of application (make check payable to *Franklin County Treasurer*)
NO Cash, Checks Only.
- 3) Copy of covenants or deed restrictions. This may be obtained from the Franklin County Recorder's Department, 373 South High Street, 18th Floor, Columbus, Ohio 43215.
- 4) Two (2) copies of Auditor's Tax Map. The map shall include the subject property and all land within five hundred (500) feet of such property. This map may be obtained from the Franklin County Auditor's Department, 373 South High Street, 20th Floor, Columbus, Ohio 43215.
- 5) Two (2) copies of a site map accurately drawn to an appropriate scale. This map shall be submitted in addition to the Auditor's Tax Map. (No larger than 11"x17")
 - To be shown on the site map:
 - Scale
 - North arrow
 - All property lines
 - Dimensions of the property
 - Road frontage
 - Driveways
 - All existing and proposed buildings and structures
 - Proposed addition or expansion area to buildings or structures
 - Square footage of all existing and proposed buildings
 - Height of all existing and proposed buildings
 - Distance from the property line to all structures
 - Street right-of-ways
 - Easements
 - Floodplain
 - Location of existing septic and/or aerator systems and wells on site
 - Any information relevant to the specific nature of the variance
- 6) A list of all owners of property located within 300 feet (in all directions) of the exterior boundaries of the subject property. The address of owners shall be those appearing on the County Auditor's current tax list of the Treasurer's mailing list. This information may also be obtained at the Franklin County Auditor's Department (address listed above).
 - ***Physical mailing address only, not Mortgage Company's address.***
- 7) All information that pertains to sanitary services and water supply must be provided. If services are to be provided by a private or public entity, a letter must be provided verifying that the services exists and that the applicant will have access to such services. If an on-lot septic system and/or well are proposed, information from the Franklin County Board of Health (or appropriate agency) must be provided.
 - All applications will be sent to the Board of Health and/or EPA.

Variance Fee (*Fees Subject to Change*)

Commercial	\$400.00
Plus, each abutter to be notified	\$2.50/each abutter
Maximum Fee	\$475.00
Residential	\$300.00
Plus, each abutter to be notified	\$2.50/each abutter
Maximum Fee	\$375.00

Checklist for Submittal of Requirements For a Variance

	Applicant Initials	Intake Initials	Requirements
1.			Completed Application (included in packet)
2.			Fee Payment-No Cash (Checks Only)
3.			Variance Criteria Completed (included in packet)
4.			Abutters List (Surrounding Property Owners) Physical Mailing Address Only, Not Mortgage Companies
5.			Two (2) Auditor's Tax Maps
6.			Two (2) Site Maps (Maximum Size 11"x17")
7.			Copy of Current Covenants and/or Deed
8.			Notarized Signature of Property Owner